

The Fulbright Foundation - Greece



STUDENT/EXCHANGE VISITOR QUESTIONNAIRE

Dear student/exchange visitor visa applicant,

In our effort to better evaluate the services provided by the U.S. Department of State supported EducationUSA Advising Centers in Athens and Thessaloniki, we are asking that you briefly answer the questions below. **The information that you provide in this questionnaire will NOT affect the Consular Officer's decision in issuing you a visa.**

Please return this form to your U.S. Consular officer.

Today's Date (month/day/year): ____/____/____

Gender: (Check one)

☐ Male ☐ Female

Academic Year of Program Start (for example 2006-2007): _____

Name and Location of U.S. academic institution/program you will attend or participate in:

Type of program in the US: (Check one)

☐ Bachelor ☐ Masters ☐ Ph.D. ☐ English Language Program ☐ Medical Residency

☐ Other (Specify) _____

Field of study/research: _____

Type of visa you are applying for: (Check one)

☐ F-1 ☐ J-1 ☐ M-1

If you are applying for a J-1 visa then please specify category: (Check one)

☐ Master ☐ PhD Program ☐ Post Doctoral Program ☐ Medical Residency

☐ Other (Specify) _____

SOURCES OF INFORMATION ON U.S. STUDY:

Did you use the services of the **Fulbright Foundation** Advising Centers in Athens or Thessaloniki?

☐ Fulbright Foundation in Athens ☐ Fulbright Foundation in Thessaloniki ☐ No

Did you use any other educational advising services other than the **Fulbright Foundation** Advising Centers in Athens or Thessaloniki?

☐ Yes ☐ No

Thank you for your time. We wish you the best of luck!